

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington**

To: Pharmacies
All Prescribers
Managed Care Plans

**Memorandum No.: 03-93 MAA
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**For More Information, call:
1-800-562-6188**

From: Douglas Porter, Assistant Secretary
Medical Assistance Administration

Subject: Updates to the Prescription Drug Program – Additions to MAA’s Preferred Drug List

Effective for the week of January 1, 2004, the Medical Assistance Administration (MAA) will implement the following changes to the Prescription Drug Program:

- Additions to MAA’s Preferred Drug List;
- Drugs now requiring prior authorization; and
- Change to MAA’s prior authorization fax number.

Additions to MAA’s Preferred Drug List

Non-preferred drugs in these classes will require the pharmacy to call MAA for prior authorization.

Drug Class	Preferred Drug
Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)	All generic NSAIDs (generic NSAIDs will still require Expedited Prior Authorization with no change in existing criteria).
Estrogens	Estradiol vaginal cream and generic estradiol oral tablets

Drugs Now Requiring Prior Authorization

Drug
NSAIDs: All brands (COX-2 inhibitors will remain on Expedited Prior Authorization with no change in existing criteria)
Estrogens: all estradiol transdermal systems, Estrace® brand tablets, Premarin® tablets and vaginal cream, Menest®, Ogen® and estropipate tablets and vaginal cream, Cenestin®, Vagifem®, Estring®, Femring®, and all estrogen/progestin combination tablets and transdermal systems for hormone replacement therapy.

MAA’s Pharmacy Prior Authorization fax number has changed to 360-725-2141.

To obtain this memorandum electronically, go to MAA’s website at <http://maa.dshs.wa.gov> (Click on the Provider Publications/Fee Schedules link).